

May 7, 2012

Dear City Council,

On December 5, 2011, we purchased the hair salon at 1551 N. Cotner. The building was originally built in 1914 as the First Bank of Bethany. Our building has been listed on the historic registry for over 25 years and we have spent the last 5 months trying to restore the building as much as possible to its original condition.

We have restored the original hard wood and antique porcelain tiles as well as patching walls and structure issues. North windows and door have been replaced which has greatly enhanced both the structure and the look of the building. After much difficulty we have finally found a builder, plumber and electrician to help me with the final projects. Plans are in place to replace old plumbing and electrical again mindful of the age of the building. We have plans for our builder to put the final touches on our project.

Plans are to open, Gratitude Café & Bakery, a place for community, wholesome food and a positive space to bring the neighborhood together. There is a heart-space for a bakery within Bethany, since there has not been a bakery in that area since Daylight Donuts nearly 15 years ago. We want to fill that void and pull from the talent and recipe boxes of the neighborhood, including the Cotner Center.

Our heart is in this community and it has been met by an overwhelming amount of support. As part of Bethany, we want very much to cater to the residents with opening a gathering space and enhance the historic strip with a much needed bike rack and bench in front. We have received support of my plans from the neighborhood, fellow businesses and the community of the Cotner Center.

We are coming to you for help. We need your approval to place a 60 inch platform with an attached ramp to make our business wheelchair accessible, so the entire community will be able to enjoy Gratitude Café & Bakery.

We are submitting the following for the approval process:

- 1) This letter.
- 2) Detailed blueprint of the proposed platform & ramp.
- 3) Proof of insurance of \$500,000 coverage with the city named as a carrier.
- 4) Proof of a \$5000 bond.

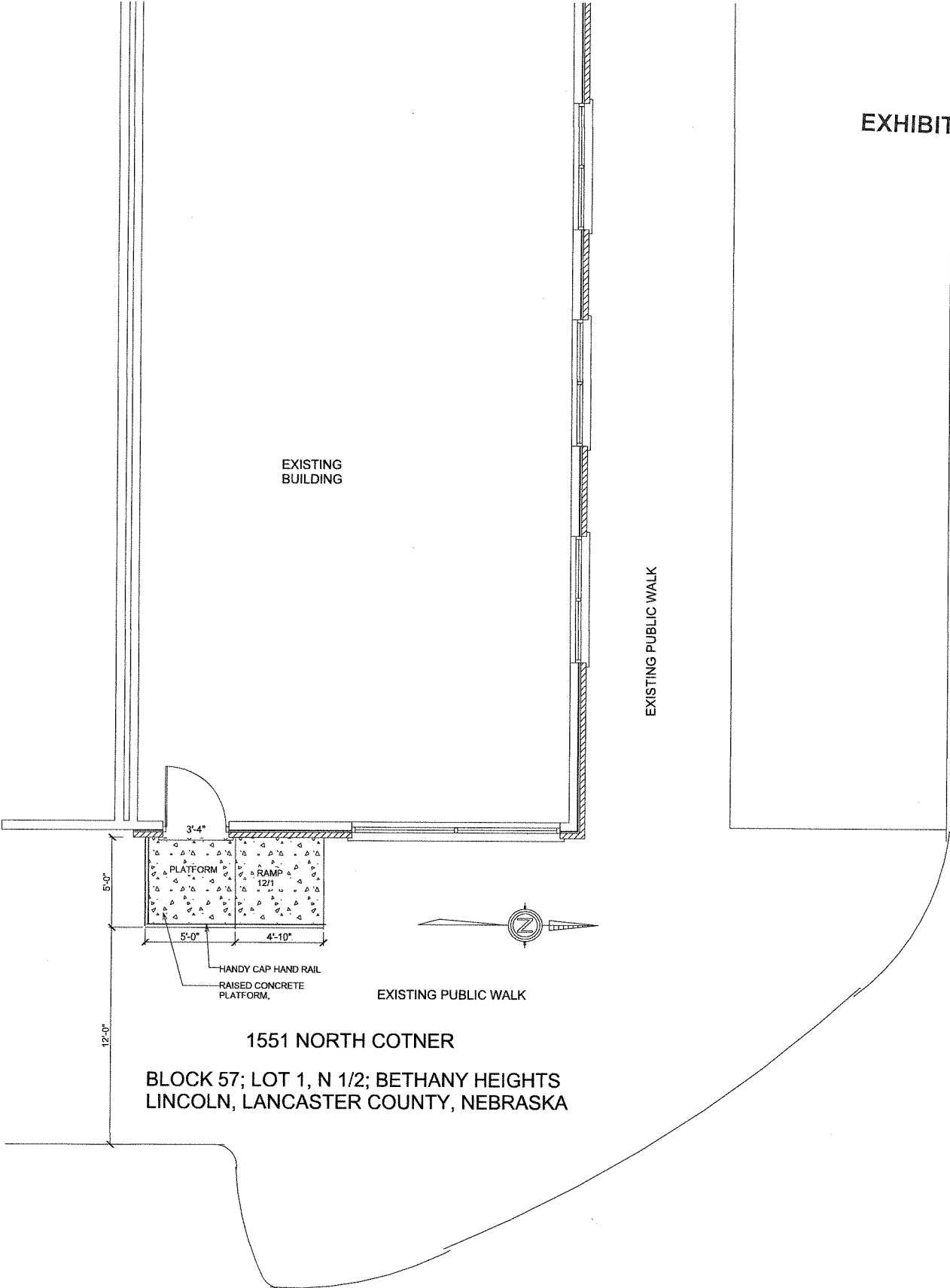
Thank you for your time and attention.

Sincerely,



Katie Cloran
Owner
Gratitude Café & Bakery

EXHIBIT "B"



FAIRFAX AVE.

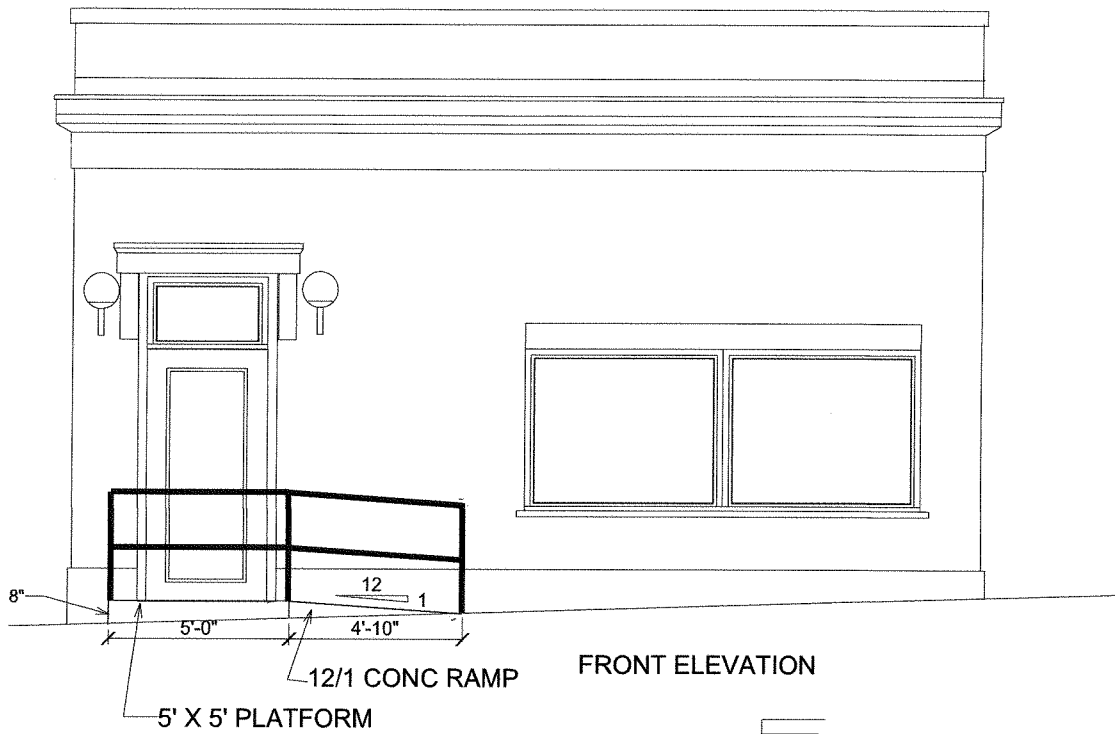
LENHOFF CONSTRUCTION	1551 N COTNER	APPROVED BY
	FIRST FLOOR	

SAYER
DRAFTING
AND
DESIGN

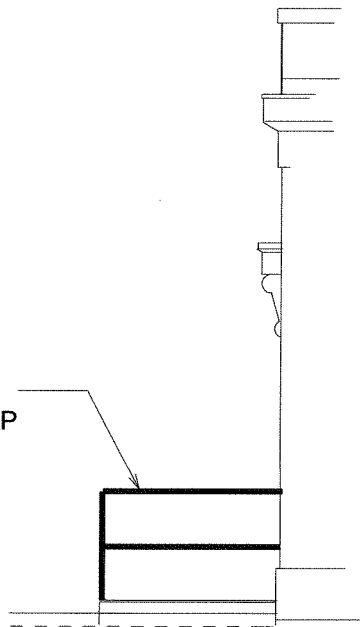
BY PAUL SAYER

THESE PLANS ARE THE PROPERTY OF THE OWNER LISTED ABOVE. OWNER TO VERIFY ALL DIMENSIONS AND SPECIFICATIONS PRIOR TO CONSTRUCTION. OWNER ASSUMES ALL LIABILITIES OF DESIGN AND CONSTRUCTION THEREOF. OWNER TO BE SURE CONSTRUCTION CONFORMS TO ALL BUILDING CODES.

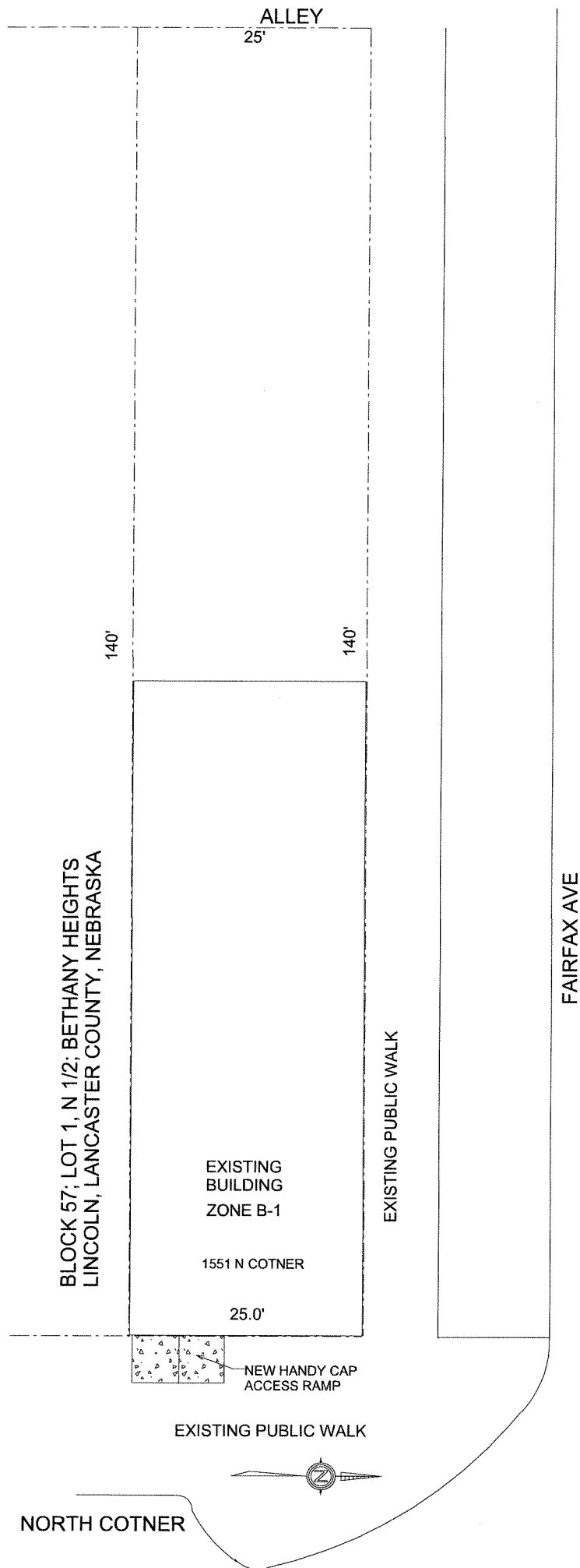
DATE	2012
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36" HIGH
HANDY CAP
RAIL



LENHOFF CONSTRUCTION	1551 N COTNER	APPROVED BY
	FRONT - SIDE	
<p>SAYER DRAFTING AND DESIGN</p> <p>BY PAUL SAYER</p> <p>THESE PLANS ARE THE PROPERTY OF THE OWNER LISTED ABOVE. OWNER TO VERIFY ALL DIMENSIONS AND SPECIFICATIONS PRIOR TO CONSTRUCTION. OWNER ASSUMES ALL LIABILITIES OF DESIGN AND CONSTRUCTION THEREOF. OWNER TO BE SURE CONSTRUCTION CONFORMS TO ALL BUILDING CODES.</p>		
DATE	2012	
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LENHOFF CONSTRUCTION	
1551 N COTNER	PLOT
APPROVED BY	

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Auto-Owners Insurance

LICENSE AND PERMIT BOND

For County, City, Town or Village Only - Not Valid for Bonds Required by the State. Not Valid for Contract, Performance, Maintenance, Subdivision, Agent to Sell Hunting and Fishing Licenses or Utility Guarantee Bonds.

KNOW ALL MEN BY THESE PRESENTS:

BOND No. 66134021

That we, GRATITUDE CAFE & BAKERY as Principal, and the Auto-Owners Insurance Company, a Corporation duly licensed to do business in the State of NEBRASKA, as Surety, are held and firmly bound unto CITY OF LINCOLN the Oblige, in the amount of FIVE-THOUSAND (\$ 5000.) DOLLARS, lawful money of the United States, to be paid to said Oblige, for which payment well and truly to be made, we bind ourselves and our legal representatives, jointly and severally.

THE CONDITION OF THIS OBLIGATION IS SUCH, That whereas, the Principal has been licensed as a CAFE & BAKERY by the Oblige.

NOW THEREFORE, if the Principal shall faithfully perform the duties and comply with the laws and ordinances (including all amendments), pertaining to the license or permit, then this obligation to be void, otherwise to remain in full force and effect for a period commencing on the 2ND day of MAY, 2012, and ending on the 2ND day of MAY, 2013, unless renewed by continuation certificate.

This bond may be terminated at any time by the Surety upon sending notice in writing to the Oblige and to the Principal, in care of the Oblige or at such other address as the Surety deems reasonable, and at the expiration of thirty (30) days from the mailing of notice or as soon thereafter as permitted by applicable law, whichever is later, this bond shall terminate and the Surety shall be relieved from any liability for any subsequent acts, or omissions of the Principal.

Dated this 2ND day of MAY, 2012.

GRATITUDE CAFE & BAKERY

Principal

Marilyn Sloan

Principal

AUTO-OWNERS INSURANCE COMPANY

By Carolyn J. McFarland
CAROLYN J. MCFARLAND Attorney-in-Fact

DATE AND ATTACH TO ORIGINAL BOND
AUTO-OWNERS INSURANCE COMPANY

LANSING, MICHIGAN
POWER OF ATTORNEY

NO. 66134021

KNOW ALL MEN BY THESE PRESENTS: That the AUTO-OWNERS INSURANCE COMPANY AT LANSING, MICHIGAN, a Michigan Corporation, having its principal office at Lansing, County of Eaton, State of Michigan, adopted the following Resolution by the directors of the Company on January 27, 1971, to wit:

"RESOLVED, That the President or any Vice President or Secretary or Assistant Secretary of the Company shall have the power and authority to appoint Attorneys-in-fact, and to authorize them to execute on behalf of the Company, and attach the seal of the Company thereto, bonds and undertakings, recognizances, contracts of indemnity, and other writings obligatory in the nature thereof. Signatures of officers and seal of Company imprinted on such powers of attorney by facsimile shall have same force and effect as if manually affixed. Said officers may at any time remove and revoke the authority of any such appointee."

Does hereby constitute and appoint CAROLYN J MCFARLAND

its true and lawful attorney(s)-in-fact, to execute, seal and deliver for and on its behalf as surety, any and all bonds and undertakings, recognizances, contracts of indemnity and other writings obligatory in the nature thereof, and the execution of such instrument(s) shall be as binding upon the AUTO-OWNERS INSURANCE COMPANY AT LANSING, MICHIGAN as fully and amply, to all intents and purposes, as if the same had been duly executed and acknowledged by its regularly elected officers at its principal office.

IN WITNESS WHEREOF, the AUTO-OWNERS INSURANCE COMPANY AT LANSING, MICHIGAN, has caused this to be signed by its authorized officer this 3rd day of January, 2012

Kenneth R. Schroeder

Senior Vice President

STATE OF MICHIGAN } ss.
COUNTY OF EATON }

On this 3rd day of January, 2012, before me personally came Kenneth R. Schroeder, to me known, who being duly sworn, did depose and say that they are Kenneth R. Schroeder, Senior Vice President of AUTO-OWNERS INSURANCE COMPANY, the corporation described in and which executed the above instrument, that they know the seal of said corporation, that the seal affixed to said instrument is such Corporate Seal, and that they received said instrument on behalf of the corporation by authority of their office pursuant to a Resolution of the Board of Directors of said corporation.



My commission expires January 1st, 2014

Amanda Lamp

Notary Public

STATE OF MICHIGAN } ss.
COUNTY OF EATON }

I, the undersigned First Vice President, Secretary and General Counsel of AUTO-OWNERS INSURANCE COMPANY, do hereby certify that the authority to issue a power of attorney as outlined in the above board of directors resolution remains in full force and effect as written and has not been revoked and the resolution as set forth are now in force.

Signed and sealed at Lansing, Michigan. Dated this 3rd day of January, 2012



Stuart R. Birn, First Vice President, Secretary and General Counsel

*This power of attorney is attached to bond number 66134021, issued to GRATITUDE CAFE & BAKERY on May 2nd, 2012.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

05/02/2012

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER STUCHLIK & ASSOCIATES INSURANCE & FINANCIAL SERVICES 130 CHERRY HILL BLVD LINCOLN NE 68510-	CONTACT NAME: PHONE (A/C, No, Ext): (402) 489-8990 FAX (A/C, No): (402) 489-0314 E-MAIL ADDRESS: @STUCHLIKINSURANCE.COM PRODUCER CUSTOMER ID #: CLORAN, KATHARINE E
INSURED CLORAN, KATHARINE E DBA GRATITUDE CAFE & BAKERY PO BOX 5732 LINCOLN NE 68505-	INSURER(S) AFFORDING COVERAGE INSURER A: ALLIED INSURANCE COMPANY INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:

COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY			ACP 7205394344	12/05/2011	12/05/2012	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				/ /	/ /	DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR				/ /	/ /	MED EXP (Any one person) \$ 1,000
					/ /	/ /	PERSONAL & ADV INJURY \$ 1,000,000
					/ /	/ /	GENERAL AGGREGATE \$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:				/ /	/ /	PRODUCTS - COMP/OP AGG \$ 2,000,000
	<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				/ /	/ /	\$
	AUTOMOBILE LIABILITY				/ /	/ /	COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO				/ /	/ /	BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS				/ /	/ /	BODILY INJURY (Per accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS				/ /	/ /	PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS				/ /	/ /	\$
	<input type="checkbox"/> NON-OWNED AUTOS				/ /	/ /	\$
	UMBRELLA LIAB				/ /	/ /	EACH OCCURRENCE \$
	EXCESS LIAB				/ /	/ /	AGGREGATE \$
	DEDUCTIBLE				/ /	/ /	\$
	RETENTION \$				/ /	/ /	\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				/ /	/ /	WC STATUTORY LIMITS OTHER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y/N		N/A		/ /	/ /	E.L. EACH ACCIDENT \$
	(Mandatory in NH)				/ /	/ /	E.L. DISEASE - EA EMPLOYEE \$
	If yes, describe under DESCRIPTION OF OPERATIONS below				/ /	/ /	E.L. DISEASE - POLICY LIMIT \$
					/ /	/ /	
					/ /	/ /	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

INCLUDED AS AN ADDITIONAL INSURED: CITY OF LINCOLN.

CERTIFICATE HOLDER**CANCELLATION**

(402) 441-7521 (402) 441-8214
ATTN: BARNEY

CITY OF LINCOLN
DEPT OF BUILDING & SAFETY
555 S. 10TH, ROOM 203
LINCOLN NE 68508-

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE